

Work Order ID 92004

\*92004\*

Page 1

October-19-12 1:18:00 PM

Item ID: 647.1710

Accept

\*N9000040100\*

Setup Start

\*NS1\*

Revision ID:

Stop

\*NS2\*

Item Name: Plate

Start Date: 19/10/2012 Start Qty: 2.00

\*2\*

Cust Item ID:

Required Date: 02/11/2012 Req'd Qty: 2.00

\*2\*

Customer:

Reference:

Approvals:

Process Plan: ML5

Date: 12-10-19 Tooling:

Date:

QC:

Date:

SPC (Y/N):

Date:

Run Start

\*NR1\*

Stop

\*NR2\*

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
--------------------------------	--------------------------	----------------------	---------	--------	--------------	---------------	---------------	------------------	----------------

Draw Nbr

Revision Nbr

647.1700

N/C

110

0.00

\*110\*

Waterjet

FLOW CNC Waterjet

Memo

1-Cut as per Dwg

Dwg Rev: N/C

Prog Rev: N/C

2-Deburr if necessary

0.00

2

0

Jm 12-12-5

120

QC2- Inspect parts off machine FAI/FAIB

0.00

\*120\*

QC

Quality Control

Memo

0.00

2

0

Jm 12-12-5

NCR: Yes / No

**WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____  Part No. _____  NCR No. _____				<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		<b>AGAINST DEPARTMENT/PROCESS</b>  <div style="display: flex; justify-content: space-between;"> <div>           Skid-tube <input type="checkbox"/>            Machining <input type="checkbox"/>            Thermoforming <input type="checkbox"/>            Large Fab <input type="checkbox"/> </div> <div>           Crosstube <input type="checkbox"/>            Small Fab <input type="checkbox"/>            Finishing <input type="checkbox"/>            Composite <input type="checkbox"/> </div> <div>           Water Jet <input type="checkbox"/>            Prod. Eng. Coord. <input type="checkbox"/>            Rec/Store/Packaging <input type="checkbox"/>            Supplier <input type="checkbox"/> </div> <div>           Engineering <input type="checkbox"/>            Quality <input type="checkbox"/>            Other <input type="checkbox"/> </div> </div>					
<b>Root Cause</b>	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data <input type="checkbox"/>											
Equip/Tooling <input type="checkbox"/>											
Operator <input type="checkbox"/>											
Material <input type="checkbox"/>											
Setup <input type="checkbox"/>											
Other <input type="checkbox"/>											
Process <input type="checkbox"/>											
Supplier <input type="checkbox"/>											
Training <input type="checkbox"/>											
Unapproved <input type="checkbox"/>											
<b>FAULT CATEGORY</b>											
<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped. <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube			<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio			<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions			<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge  <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled  <input type="checkbox"/> Other		

# Work Order ID 92004

\*92004\*

Page 2

October-19-12 1:18:00 PM

Item ID: 647.1710

Accept

\*N9000040100\*

Setup Start \*NS1\*

Revision ID:

Stop \*NS2\*

Item Name: Plate

Start Date: 19/10/2012 Start Qty: 2.00 \*2\*

Cust Item ID:

Required Date: 02/11/2012 Req'd Qty: 2.00 \*2\*

Customer:

Reference:

Approvals: Process Plan: Date:

Tooling: Date:

Run Start \*NR1\*

QC: Date:

SPC (Y/N): Date:

Stop \*NR2\*

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
130 *130* QC Quality Control	QC8- Inspect parts - second check  Memo	0.00 0.00				0			

140 *140* Brake NC Brake NC	Form as per dwg  Memo	0.00 0.00				2			13/01/18
--------------------------------------	-----------------------------	--------------	--	--	--	---	--	--	----------

150 *150* QC Quality Control	QC5- Inspect part completeness to step on W/O  Memo	0.00 0.00				2			
---------------------------------------	---	--------------	--	--	--	---	--	--	--

\*151\*  
purch.

issue PO: 19017

CR 13/02/04 X2 -

\*152\*  
rec'd

rec'd + inspect  
attached c/c to W/O:

13/3/14

NCR: Yes / No

**WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____  Part No. _____  NCR No. _____				<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		<b>AGAINST DEPARTMENT/PROCESS</b>  <div style="display: flex; justify-content: space-between;"> <div>           Skid-tube <input type="checkbox"/>            Machining <input type="checkbox"/>            Thermoforming <input type="checkbox"/>            Large Fab <input type="checkbox"/> </div> <div>           Crosstube <input type="checkbox"/>            Small Fab <input type="checkbox"/>            Finishing <input type="checkbox"/>            Composite <input type="checkbox"/> </div> <div>           Water Jet <input type="checkbox"/>            Prod. Eng. Coord. <input type="checkbox"/>            Rec/Store/Packaging <input type="checkbox"/>            Supplier <input type="checkbox"/> </div> <div>           Engineering <input type="checkbox"/>            Quality <input type="checkbox"/>            Other <input type="checkbox"/> </div> </div>					
<b>Root Cause</b>	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data <input type="checkbox"/>											
Equip/Tooling <input type="checkbox"/>											
Operator <input type="checkbox"/>											
Material <input type="checkbox"/>											
Setup <input type="checkbox"/>											
Other <input type="checkbox"/>											
Process <input type="checkbox"/>											
Supplier <input type="checkbox"/>											
Training <input type="checkbox"/>											
Unapproved <input type="checkbox"/>											

FAULT CATEGORY									
<b>Landing Gear</b>			<b>General</b>			<b>Other</b>			<b>Other</b>
<input type="checkbox"/> Bending	<input type="checkbox"/> Bend	<input type="checkbox"/> Grain	<input type="checkbox"/> Ovalized	<input type="checkbox"/> Pressure/Forced					
<input type="checkbox"/> Centre Not Concentric to O/S	<input type="checkbox"/> BOM/Route	<input type="checkbox"/> Hardware	<input type="checkbox"/> Over/Under tolerance	<input type="checkbox"/> Temperature/Cure					
<input type="checkbox"/> Cracks	<input type="checkbox"/> Broken/Damaged	<input type="checkbox"/> Inspection Incomplete	<input type="checkbox"/> Part Incorrect	<input type="checkbox"/> Weld					
<input type="checkbox"/> Crushed/Crimped	<input type="checkbox"/> Burrs	<input type="checkbox"/> Instructions Incomplete/Unclear	<input type="checkbox"/> Part Lost/Missing	<input type="checkbox"/> Wrong Stock Pulled					
<input type="checkbox"/> Cuffs	<input type="checkbox"/> Contamination	<input type="checkbox"/> Maintenance	<input type="checkbox"/> Part Moved						
<input type="checkbox"/> Heat Treat	<input type="checkbox"/> Countersink	<input type="checkbox"/> Mislabeled	<input type="checkbox"/> Positioned Wrong						
<input type="checkbox"/> Inspection Strip in Tube	<input type="checkbox"/> Cut Too Short	<input type="checkbox"/> Misread	<input type="checkbox"/> Power Loss/Surge	<input type="checkbox"/> Other					
<input type="checkbox"/> Ripples in Bend	<input type="checkbox"/> Drill Holes	<input type="checkbox"/> Offset							
<input type="checkbox"/> Torque Waves in Extrusion	<input type="checkbox"/> Drawing	<input type="checkbox"/> Out of Calibration							
<input type="checkbox"/> Turning Sequence	<input type="checkbox"/> Finish	<input type="checkbox"/> Out of Sequence							
<input type="checkbox"/> Wave/Twist in Tube	<input type="checkbox"/> Folio	<input type="checkbox"/> Outside Dimensions							

# Work Order ID 92004

Friday, March 22, 2013 9:16:20 AM

\*92004\*

Page 3

Item ID: 647.1710

Accept

\*N900040100\*

Setup Start \*NS1\*

Revision ID:

Item Name: Plate

Stop \*NS2\*

Start Date: 10/19/2012 Start Qty: 2.00

\*2\*

Cust Item ID:

Required Date: 11/2/2012 Req'd Qty: 2.00

\*2\*

Customer:

Reference:

Approvals:

Process Plan:

Date:

Tooling:

Date:

Run Start \*NR1\*

QC:

Date:

SPC (Y/N):

Date:

Stop \*NR2\*

Sequence ID/  
Work Center ID

Operation  
Description

Set Up/  
Run Hours

Tool ID

Tool #

Plan  
Code

Accept  
Qty

Reject  
Qty

Reject  
Number

Insp.  
Stamp

150 153

QC5- Inspect part completeness to step on W/O

0.00

\*150\*

QC

Memo

0.00

Quality Control

155

0.00

\*155\*

SprayPaint

Memo

0.00

Spray Painting

PRIME IAW MIL-P-23377J TYPE I CLASS N AS PER DWG. (SEE NOTE 3)

CARDINAL 4860-50 PRIMER BATCH: 124204

156

QC14- Inspect Spray Paint

0.00

\*156\*

QC

Memo

0.00

Quality Control

2 0 0 A8  
13-3-22

(12)

# Work Order ID 92004

\*92004\*

Page 3

October-19-12 1:18:00 PM

Item ID: 647.1710

Accept

\*N900040100\*

Setup Start

\*NS1\*

Revision ID:

Item Name: Plate

Stop

\*NS2\*

Start Date: 19/10/2012 Start Qty: 2.00

\*2\*

Cust Item ID:

Required Date: 02/11/2012 Req'd Qty: 2.00

\*2\*

Customer:

Reference:

Approvals:

Process Plan:

Date:

Tooling:

Date:

Run Start

\*NR1\*

QC:

Date:

SPC (Y/N):

Date:

Stop

\*NR2\*

Sequence ID/  
Work Center ID

Operation  
Description

Set Up/  
Run Hours

Tool ID

Tool #

Plan  
Code

Accept  
Qty

Reject  
Qty

Reject  
Number

Insp.  
Stamp

160

Identify as per dwg & Stock Location: MF

0.00

\*160\*

Packaging

Memo

0.00

Packaging

\*\*\*IDENTIFY AS PER APICAL MPP-120 BY STAMPING P# AND REV\*\*\*

shipped to Apical

13-03-28

170

QC21- Final Inspection - Work Order Release

0.00

\*170\*

QC

Memo

0.00

Quality Control

13/3/28

MC5 13-03-28

NCR: Yes / No

**WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____  Part No. _____  NCR No. _____	<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	<b>AGAINST DEPARTMENT/PROCESS</b>  <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>															
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>															
Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																

Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data <input type="checkbox"/>									
Equip/Tooling <input type="checkbox"/>									
Operator <input type="checkbox"/>									
Material <input type="checkbox"/>									
Setup <input type="checkbox"/>									
Other <input type="checkbox"/>									
Process <input type="checkbox"/>									
Supplier <input type="checkbox"/>									
Training <input type="checkbox"/>									
Unapproved <input type="checkbox"/>									

**FAULT CATEGORY**

<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions
		<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge
		<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other

# Picklist Print

October-19-12 1:18:04 PM

Page 1

✓ Work Order ID: 92004

Parent Item: 647.1710

Parent Item Name: Plate

\*92004\*

\*647 1710\*

Start Date: 19/10/2012

Required Date: 02/11/2012

Start Qty: 2.00

Required Qty: 2.00

Comments: IPP REV:A 12.10.04 NEW ISSUE DD VERF:JFS

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
---------------------------------	------------------------	---------------	-------------	---------------------	------------------	-----------------	--------------------	----------------	-------------	--------------	---------------	----------------	--------

M7075T6S.160		Purchased	No			110	sf	0.0000	1.096	2.307368			
--------------	--	-----------	----	--	--	-----	----	--------	-------	----------	--	--	--

\*M7075T6S 160\*

7075-T6 Sheet .160

\*\*

2.4

Im 2-125

123644

123644



NCR: Yes / No

## WORK ORDER NON-CONFORMANCE / UPDATE

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____  Part No. _____  NCR No. _____	<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	<b>AGAINST DEPARTMENT/PROCESS</b>  <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>															
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>															
Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																

Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data <input type="checkbox"/>									
Equip/Tooling <input type="checkbox"/>									
Operator <input type="checkbox"/>									
Material <input type="checkbox"/>									
Setup <input type="checkbox"/>									
Other <input type="checkbox"/>									
Process <input type="checkbox"/>									
Supplier <input type="checkbox"/>									
Training <input type="checkbox"/>									
Unapproved <input type="checkbox"/>									

### FAULT CATEGORY

<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped. <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions
		<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge
		<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other



APICAL  
INDUSTRIES, INC.

ENGINEERING CHANGE NOTICE NO.		02937		SHEET 1 OF 1	
DWG NO. 647.1700	REV: NC	PREPARED BY J. JACKSON	DATE: 07/14/10	EFFECT ON DWG <input type="checkbox"/> INC. <input checked="" type="checkbox"/> UNINC.	
DWG TITLE: SKID DEFLECTOR ASSY					
APPROVED BY: ENGR <i>[Signature]</i>	MFG <i>[Signature]</i>	QC <i>[Signature]</i>	EFF: CURRENT ORDER		
REASON: REVISED F/N 8 AND NOTE 3. ADDED INSPECTION DIMENSIONS TO DRAWING VIEWS.					

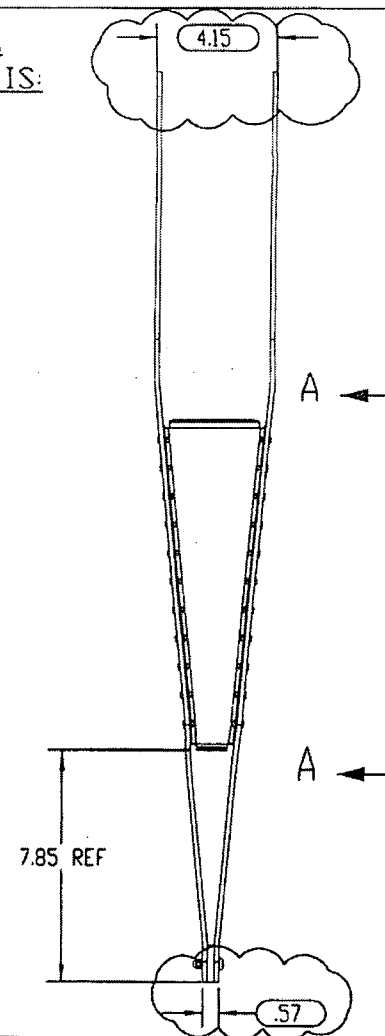
TRANSACTION CODES (TC):  
A-ADD C-CREATE  
R-REVISE D-DELETE

SHEET 1, ZONE A1 IS:

3 FINISH HARD ANODIZE IAW MIL-A-8625 TYPE III CLASS 2, COLOR BLACK;  
PRETREAT PRC-DESOTO PR-148 ADHESION PROMOTER, COLOR BLUE;  
PRIME IAW MIL-P-23377J TYPE I CLASS N

SHEET 2,  
ZONE A1 IS:

SHOP COPY  
RETURN TO  
ENGINEERING  
UNCONTROLLED COPY  
SUBJECT TO AMENDMENT  
WITHOUT NOTICE  
WORK ORDER  
NO. 9200-4 MLS  
12-10-19



8	R	601.1622	1	SCREW	MS27039-1-14 /
F/N	TC	PART NUMBER	QTY	DESCRIPTION	MATERIAL/SPECIFICATION
DOCUMENTS EFFECTED:					CHANGE CATEGORY
<input type="checkbox"/> MDL <input type="checkbox"/> INSTALL INSTRUC <input type="checkbox"/> FMS <input type="checkbox"/> ICA <input checked="" type="checkbox"/> BOM					DER REVIEW REQUIRED
					<input type="checkbox"/> MAJOR <input checked="" type="checkbox"/> MINOR
					<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO

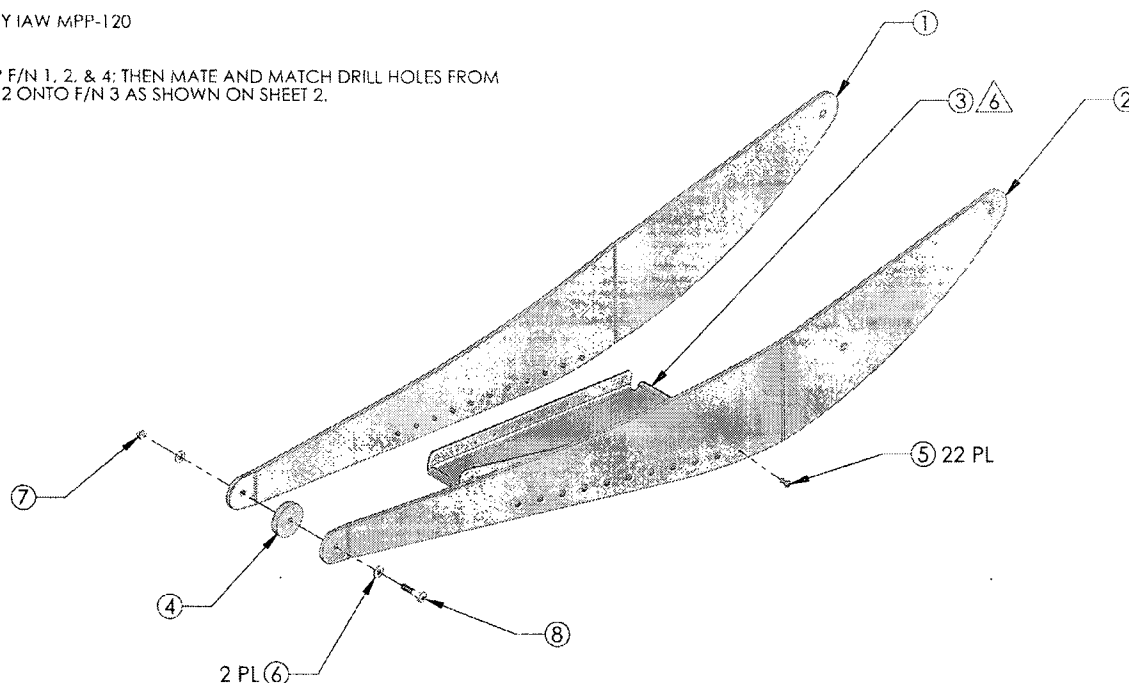
92004

THE INFORMATION CONTAINED IN THIS DOCUMENT IS THE SOLE PROPERTY OF APICAL INDUSTRIES AND IS UNCLASSIFIED EXCEPT WHERE SHOWN OTHERWISE. THE RIGHTS OF APICAL INDUSTRIES ARE RESERVED.

REV	DESCRIPTION	DATE	APPROVED
1	ISSUED FOR PRODUCTION		
2	ISSUED FOR PRODUCTION		

# NOTES:

- 1 MATERIAL: 7075-T6 ALUMINUM PER AMS-QQ-A-250/12
- 2 MATERIAL: 6061-T6 ALUMINUM BAR IAW AMS-QQ-A-250/11
- 3 FINISH: HARD ANODIZE IAW MIL-A-8625 TYPE III CLASS 2.  
COLOR BLACK: CARDINAL 4860-50 PRETREATMENT PRIMER:  
PRIME IAW MIL-P-23377J TYPE I CLASS N
- 4 DEBURR AND BREAK ALL SHARP EDGES
- 5 IDENTIFY IAW MPP-120
- 6 CLAMP F/N 1, 2, & 4; THEN MATE AND MATCH DRILL HOLES FROM F/N 1 & 2 ONTO F/N 3 AS SHOWN ON SHEET 2.



UNINCORPORATED ECN(S)

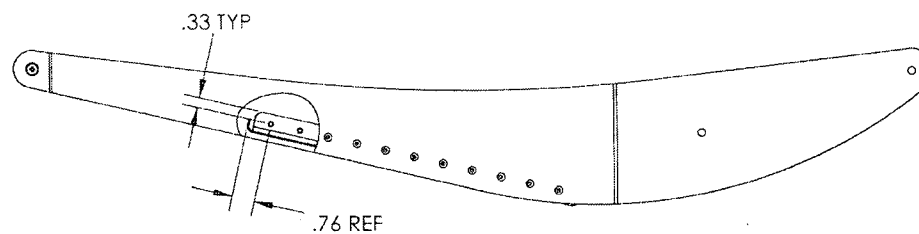
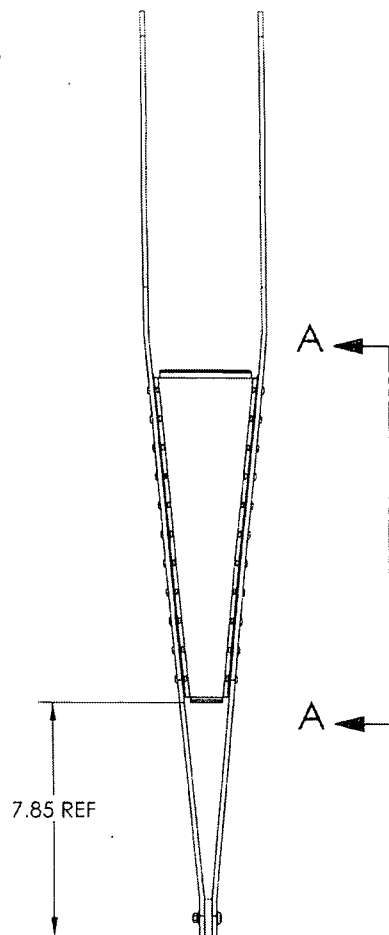
02937

QTY	1	8	601.2637	SCREW	MS2009-1-13
	1	7	601.2943	LOCKNUT	MS21042-3
	2	6	601.1607	WASHER	MS11490332P
	22	5	601.1915	RIVET	CR3213-4-0
	1	4	647.1713	SPACER	△
	1	3	647.1712	GUSSET	△
	1	2	647.1711	PLATE	△
	1	1	647.1710	PLATE	△
			647.1701	SKID DEFLECTOR ASSY	
	1701	FIND #	PART #	DESCRIPTION	MAT'L SPEC.
QTY		PARTS LIST			
NEXT ASSY (S)		APICAL INDUSTRIES			
647.1300		2609 TEMPLE HEIGHTS DR. OCEANSIDE, CA. 92056-3512 (760) 724-5300			
		SKID DEFLECTOR ASSY			
		DRAFTING			
		DESIGNED BY: [Signature]			
		CHECKED BY: [Signature]			
		APPROVED BY: [Signature]			
		DATE: 07/12/16			
		SCALE: NONE			
		SHEET 1 OF 5			

92004

ALL INFORMATION CONTAINED HEREIN IS UNCLASSIFIED  
APICAL INDUSTRIES, ALL INFORMATION IS PART OF WHOLE WITHOUT  
THE WRITTEN PERMISSION OF APICAL INDUSTRIES IS PROHIBITED

REV	DESCRIPTION	DATE	AUTHORITY

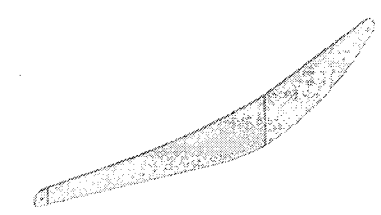
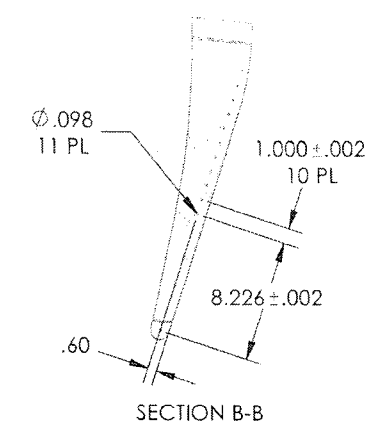
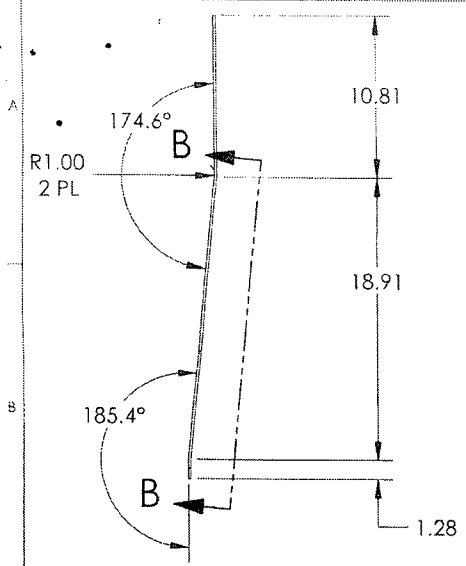


SECTION A-A

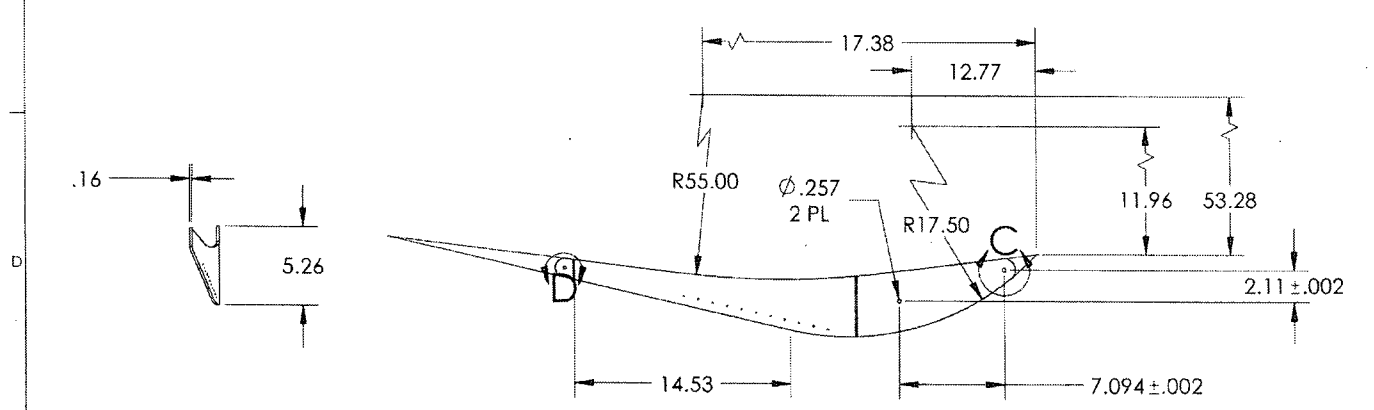
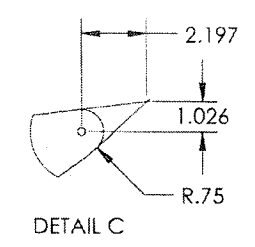
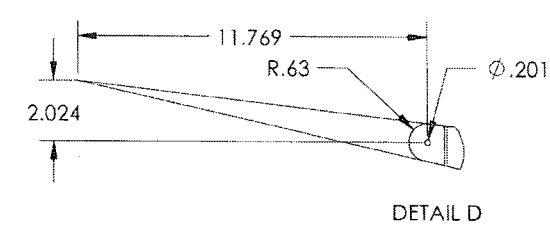
ORIGINAL DATE 04-03-04		APICAL INDUSTRIES 2608 TEMPLE HEIGHTS DR. OCEANSIDE, CA. 92056-3512 (760)724-5300	
DRAWN BY: J. GARDNER			
CHECKED BY: P. BOYD		SKID DEFLECTOR ASSY	
DRAWING APPROVAL P. BOYD			
CONTRACT NO.		647.1700	
UNLESS OTHERWISE SPECIFIED DIMENSIONS ARE IN INCHES TOLERANCES ARE: 3 PLACE DECIMALS ± .01 2 PLACE DECIMALS ± .005 ANGLES ± .5°		SHEET 2 OF 5	REV N/C

92004

THE INFORMATION CONTAINED HEREIN IS THE PROPERTY OF APICAL INDUSTRIES AND IS NOT TO BE REPRODUCED OR TRANSMITTED IN ANY FORM OR BY ANY MEANS, ELECTRONIC OR MECHANICAL, INCLUDING PHOTOCOPYING, RECORDING, OR BY ANY INFORMATION STORAGE AND RETRIEVAL SYSTEM, WITHOUT THE WRITTEN PERMISSION OF APICAL INDUSTRIES & TECHNOLOGIES.



647.1711 SHOWN  
647.1710 OPPOSITE

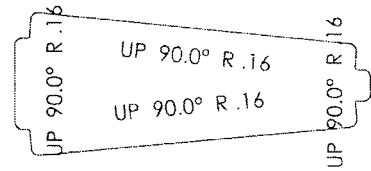
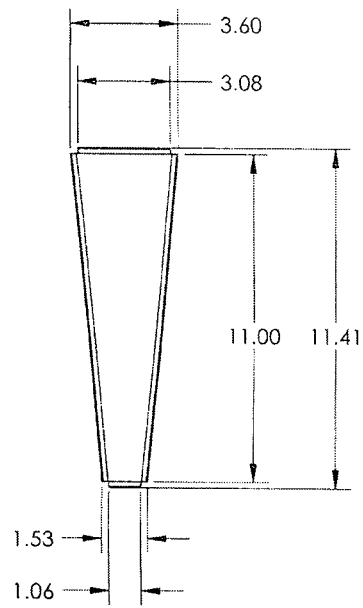


<b>APICAL INDUSTRIES</b> 2608 TEMPLE HEIGHTS DR. OCEANSIDE, CA. 92056-3512 (760) 724-5300	
<b>SKID DEFLECTOR ASSY</b>	
UNLESS OTHERWISE SPECIFIED: DIMENSIONS ARE IN INCHES DECIMALS ARE TO .001 FRACTIONS ARE TO 1/16 ANGLES ARE IN DEGREES	SHEET 3 OF 3

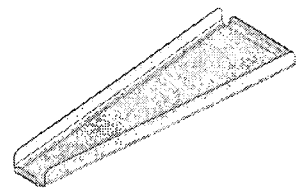
92004

THE INFORMATION CONTAINED HEREIN IS THE SOLE PROPERTY OF APICAL INDUSTRIES AND IS NOT TO BE REPRODUCED OR TRANSMITTED IN ANY FORM OR BY ANY MEANS, ELECTRONIC OR MECHANICAL, INCLUDING PHOTOCOPYING, RECORDING, OR BY ANY INFORMATION STORAGE AND RETRIEVAL SYSTEM.

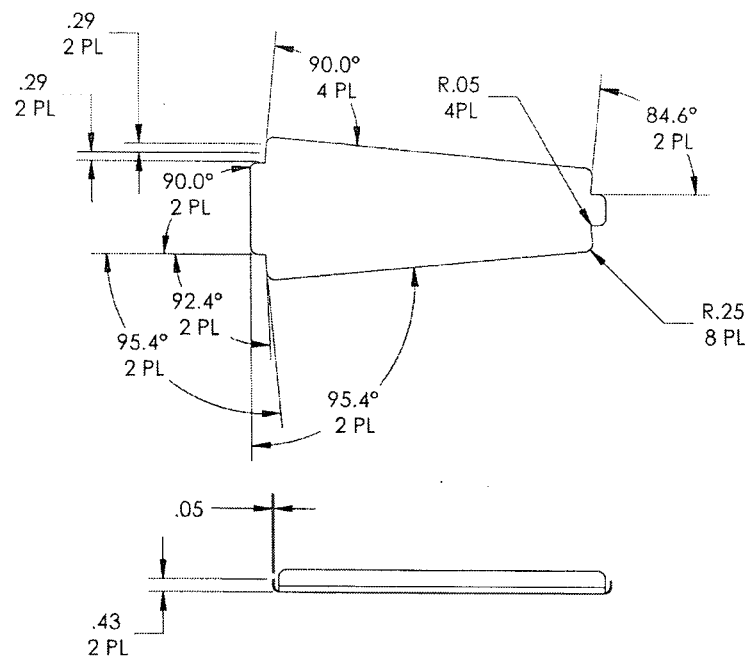
REV.	DESCRIPTION	DATE	APPROVED



FLAT PATTERN



647.1712

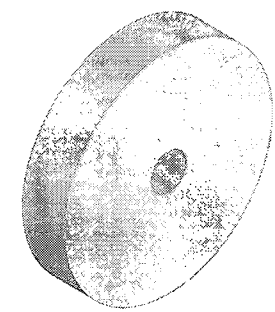
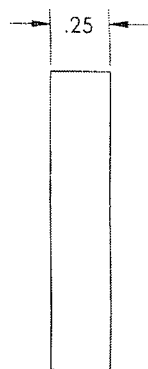


ORIGINAL DATE	APICAL INDUSTRIES		
DRAWN BY: C. HENNER	2608 TEMPLE HEIGHTS DR.		
CHECKED BY: B. BRADY	OCEANSIDE, CA. 92056-3512 (760) 724-5300		
DESIGNED BY: P. BRADY	SKID DEFLECTOR ASSY		
CONTRACT NO.			
UNLESS OTHERWISE SPECIFIED DIMENSIONS ARE IN INCHES TOLERANCES ARE: 2 PLACES DECIMALS ± .01 3 PLACES DECIMALS ± .005 ANGLES ± .5°	SIZE	CAGE CODE	EXP. TO
	8	07M26	647.1700
	SCALE: NONE		SHEET 4 OF 5

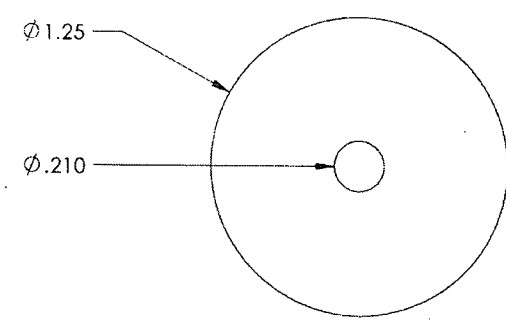
9/2004

THE INFORMATION CONTAINED ON THIS DRAWING IS THE SOLE PROPERTY OF APICAL INDUSTRIES. NO PART OF THIS DRAWING MAY BE REPRODUCED OR TRANSMITTED IN ANY FORM OR BY ANY MEANS, ELECTRONIC OR MECHANICAL, WITHOUT PERMISSION IN WRITING FROM APICAL INDUSTRIES, INC.

REV	DESCRIPTION	DATE	APPROVED



647.1713



ORIGINAL DATE INCHES: 0.0000 DRAWN BY: J. GARDNER CHECKED BY: J. GARDNER DRAWING APPROVAL: J. GARDNER CONTRACT NO.		<b>APICAL INDUSTRIES</b> 2608 TEMPLE HEIGHTS DR. OCEANSIDE, CA. 92056-3512 (760)724-5300	
UNLESS OTHERWISE SPECIFIED: DIMENSIONS ARE IN INCHES TOLERANCES ARE: 1. FRACTIONS: ±.01 2. DECIMALS: ±.005 3. ANGLES: ±.5°		SIZE: B CASE CODE: 07M26 SCALE: NONE	DWG. NO.: 647.1700 REV: N/C SHEET: 5 OF 5



